



Senate

General Assembly

File No. 441

January Session, 2001

Substitute Senate Bill No. 1024

Senate, April 25, 2001

The Committee on Public Health reported through SEN. HARP of the 10th Dist., Chairperson of the Committee on the part of the Senate, that the substitute bill ought to pass.

AN ACT CONCERNING ACCREDITATION FOR MAGNETIC RESONANCE IMAGING EQUIPMENT, SERVICES AND PERSONNEL.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- 1 (NEW) (a) On and after October 1, 2002, any licensed health care
- 2 practitioner or practitioner group acquiring, operating or replacing any
- 3 magnetic resonance imaging equipment or providing any magnetic
- 4 resonance imaging service shall obtain magnetic resonance imaging
- 5 accreditation by the American College of Radiology, or its successor
- 6 organization, for all equipment, services and personnel involved with
- 7 the magnetic resonance imaging activities of such practitioner or
- 8 practitioner group. Evidence of such accreditation, satisfactory to the
- 9 Commissioner of Public Health, shall be filed with the commissioner
- 10 prior to any such acquisition, operation, replacement or provision of
- 11 service. Any such licensed health care practitioner or practitioner
- 12 group acquiring or replacing and operating any magnetic resonance
- 13 imaging equipment or providing any magnetic resonance imaging
- 14 service on or before the effective date of this act may continue such

15 operation and provision of service, provided such practitioner or
16 practitioner group shall apply for such accreditation not later than
17 January 1, 2002, and shall file with the commissioner evidence
18 satisfactory to the commissioner that such accreditation has been
19 applied for and is likely to be obtained.

20 (b) Notwithstanding the provisions of subsection (a) of this section:
21 (1) Any health care facility or institution, as defined in section 19a-630
22 of the general statutes, that is accredited as provided in subsection (a)
23 of this section shall continue to be subject to the obligations and
24 requirements applicable to any such health care facility or institution,
25 including, but not limited to, certificate of need requirements, as
26 provided in chapter 368z of the general statutes; and (2) any
27 institution, as defined in section 19a-490 of the general statutes, that is
28 accredited as provided in subsection (a) of this section shall continue to
29 be subject to the obligations and requirements applicable to any such
30 institution as provided in chapter 368v of the general statutes.

PH *Joint Favorable Subst.*

The following fiscal impact statement and bill analysis are prepared for the benefit of members of the General Assembly, solely for the purpose of information, summarization, and explanation, and do not represent the intent of the General Assembly or either House thereof for any purpose:

OFA Fiscal Note

State Impact: Cost

Affected Agencies: Department of Public Health

Municipal Impact: None

Explanation**State Impact:**

The state will incur an FY 02 cost of approximately \$40,150 to implement provisions in this bill. Included in this sum is \$30,200 to support the three-quarter year salary of one Office Assistant, as well as associated other expenses and equipment costs needed to allow the agency to notify physicians, homeopathic physicians and podiatrists regarding accreditation standards established by the bill and acceptable methods of documenting compliance; collect and review documents verifying accreditation; follow up on unacceptable or questionable verifications; and confirm receipt of accepted documentation. Also included is \$9,950 in associated fringe benefits costs. In FY 03 and subsequent fiscal years the annualized cost of this initiative would be approximately \$50,150 (costs to the department of \$36,850 and associated fringe benefits costs of \$13,300).

No funding has been included under the Department of Public Health's budget within sHB 6668 (the Appropriations Act, as favorably reported by the Appropriations Committee) for this purpose.

OLR Bill Analysis

sSB 1024

AN ACT CONCERNING ACCREDITATION FOR MAGNETIC RESONANCE IMAGING EQUIPMENT, SERVICES, AND PERSONNEL.**SUMMARY:**

This bill establishes accreditation requirements for health care practitioners and groups acquiring and using magnetic resonance imaging equipment (MRI) or providing MRI services. Beginning October 1, 2002, the licensed practitioner or practitioner group must get MRI accreditation by the American College of Radiology for all equipment, services, and personnel involved with their MRI activities. The practitioner or group must file with the Department of Public Health (DPH) satisfactory evidence of its accreditation before acquiring, operating, or replacing MRI equipment, or providing MRI services.

Under the bill, practitioners and groups already using such equipment or providing services before October 1, 2001 can continue to do so, if they apply for accreditation by January 1, 2002 and provide DPH with satisfactory evidence of the application.

Finally, the bill specifies that it does not relieve health care facilities and institutions from applicable state licensure and certificate of need requirements.

EFFECTIVE DATE: October 1, 2001

COMMITTEE ACTION

Public Health Committee

Joint Favorable Substitute

Yea 25 Nay 0